

## PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

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Attorney Docket No.	01807.101404	202
First Nar	med Inventor or Application Identifier	333
FÉLIX HENRY		1
Express Mail Label No.		548

APPLICATION ELEMENTS  See MIFEP chapter 600 concerning utility patent application commissioner for Petrons P.O. Box 1450 Alkandris, VA 22313-1450  1. X Fee Transmittal Form (Submit an original, and a duplicate for fee processing)  2. Applicant claims small entity status. See 37 CFR 1.27.  3. X Specification  7 Total Pages  22.  4. X Drawing(s) (35 USC 113)  5. Oath or Declaration  7 Total Pages  23.  5. Oath or Declaration  7 Total Pages  24.  DELETION OF INVENTORS, Signed Statement statched deleting inventor(s) remaind in the prior application, (37 CFR 1.63(d)) (for continuation/dubishouse) with Box 17 completed)  1. DELETION OF INVENTORS, Signed Statement statched deleting inventor(s) remaind in the prior application, see 37 CFR 1.76  6. X Application Data Sheet. See 37 CFR 1.76  6. X Application Data Sheet. See 37 CFR 1.76  15. (Continuation)  17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information.  17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:  17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information.  17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:  18. CORRESPONDENCE ADDRESS  OSSIGNATION OF DIASSIONAL APPS only. The enter disclosure of the prior application network the disclosure of the prior application on which an each in decident on the accompanying continuation or discontinuation application in an early or decimation is supplied under Box Sb, is considered a part of disclosure or an eacompanying continuation or discontinuation and intermediate.  18. CORRESPONDENCE ADDRESS  OSS14  (Cry.  Cry.  State  19. (Check September 4)  10. (Submit an original and application of the prior application of the network or an only be relied upon when a portion has been inadvertently omitted from the submitted application on the heby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the sub				Express Mail	Ladel No.		<u></u>
1. X Fee Transmittal Form (Submit an original, and a duplicate for fee processing)  2. Applicant claims small entity status.  3. X Specification  7. Drawing(a) (35 USC 113)  7. Drawing(a) (35 USC 11			ADDR	ADDRESS TO: Commissioner for Patents P.O. Box 1450			
See 37 CFR 1.27.  See 37 CFR 1	1 1.1 X I		processing)	7.		r CD-R in duplicate	
Drawing(s) (35 USC 113)  Total Sheets  Dotat or Declaration  Total Pages  a. Newly executed (original or copy)  Copy from a prior application (37 CFR 1.63(d))  Inforcentinuation/divisional with Box 17 completed)  DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, sea 37 CFR 1.63(d)(Z) and 1.33(b).  Explication Data Sheet. See 37 CFR 1.76  Deletion Data Sheet. See 37 CFR 1.76  Total Pages  Deletion Of Inventor(S) Signed Statement attached deleting inventor(s) named in the prior application, sea 37 CFR 1.63(d)(Z) and 1.33(b).  Explication Data Sheet. See 37 CFR 1.76  Deletion Data Sheet. See 37 CFR 1.76  Total Pages  Deletion Of Inventor(S) Signed Statement (Inventor(S) Signed Statement (Inventor(S)) Signed Statemen				8.	·		Sequence Submission
A.   X Drawing(s) (36 USC 113)  Total Sheets	3. X Specifica	ition Total Pa	ages 22		a	Computer Readable	Form (CRF)
S. Oath or Declaration	4. X Drawing	s) (35 USC 113) Total Si	neets 5	•		•	•
ACCOMPANYING APPLICATION PARTS    DELETION OF INVENTOR(S)   Signed Statement attached deleting inventor(s)   10.    37 CFR 3.73(s) Statement (when there is an assignee)   Power of Attorney (III.   III.   III.	5. Oath or i	Declaration Total Pa	ages				(2 dopies), or
ACCOMPANYING APPLICATION PARTS    DELETION OF INVENTOR(S)   Signed Statement attached deleting inventor(s)   10.    37 CFR 3.73(s) Statement (when there is an assignee)   Power of Attorney (III.   III.   III.	a. 🗌	Newly executed (original or c	onv)		c. S	Statements verifying	identity of above copies
bCopy from a prior application (37 CFR 1.33(d))		romy executed (engineerer	~P))	<u> </u>			<del></del>
Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(q)(2) and 1.33(b).  6. X Application Data Sheet. See 37 CFR 1.76  11. English Transiation Document (if applicable)  12. X Information Disclosure Statement (IDS)/PTO-1449 Statement (IDS)/PTO-1449 X Copies of IDS Statement (IDS)/PTO-1449 Statement (IDS)	b			9.			
11.   English Translation Document (if applicable)							Power of Attorney
Statement (IDS)/PTO-1449  Citations  Preliminary Amendment  14.  Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15.  Certified Copy of Priority Document(s) (if foreign priority is claimed)  Other:  Continuation Divisional Continuation-in-part (CIP) of prior application No. / Group/Art Unit  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.  18. CORRESPONDENCE ADDRESS  O5514  (Insert Customer No. or Attach bar code label here) or Correspondence address below  NAME  Address  Zip Code		named in the prior a	pplication, see 37 CFR		English Tra	nslation Document	(if applicable)
14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. X Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Other:    Continuation   Divisional   Continuation-in-part (CIP)   Of prior application No/	6. X Applicati	on Data Sheet. See 37 CFR 1	76	12. X			1 X 1 '
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X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below  NAME  Address  City  State  Zip Code			18. CORRES	SPONDENCE ADD	RESS		
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City State Zip Code	NAME						
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	Country		Telephone		-		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	42-20 =	22	X \$ 18.00 =	\$396.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	4-3 =	1	X \$ 86.00 =	\$86.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$290.00 =	\$290.00
				BASIC FEE (37 CFR 1.16(a))	
			Total of	above Calculations =	\$1542.00
<u> </u>	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9,	1.27, 1.28).	
				TOTAL =	\$1542.00
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Christopher Philip Wrist - Reg. No. 32,078			
SIGNATURE	Claud			
DATE	February 9, 2804			

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